

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/054,597	04/03/98	704	2741	2345/39

APPLICANT

JOACHIM POSEGGA, BRUCHSAL, FED REP GERMANY.

****CONTINUING DOMESTIC DATA*******

VERIFIED NO

OE

****371 (NAT'L STAGE) DATA*******

VERIFIED

NO

OE

****FOREIGN APPLICATIONS*******

VERIFIED FED REP GERMANY 197 13 966.3 04/04/97

yes OE

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no Verified and Acknowledged <u>OE</u>	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Initials _____	STATE OR COUNTRY DEX	SHEETS DRAWING 1	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 2
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ADDRESS

RICHARD L MAYER
KENYON & KENYON
ONE BROADWAY
NEW YORK NY 10004

TITLE

METHOD AND APPARATUS FOR USING A SERVICE MADE AVAILABLE IN A
TELECOMMUNICATIONS NETWORK

FILING FEE RECEIVED \$920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Printed 05/03/2001

APPLICATION NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO
09/054,597	04/03/1998	379	2645	2345/39

APPLICANT
JOACHIM POSEGGA, BRUCHSAL, FED REP GERMANY.

CONTINUING DOMESTIC DATA***
VERIFIED
NO OE

371 (NAT'L STAGE) DATA***
VERIFIED
NO OE

FOREIGN APPLICATIONS***
VERIFIED FED REP GERMANY 197 13 966.3 04/04/1997
Yes OE

Foreign priority claimed 35 USC 119 (a-d) conditions met Allowance	<input checked="" type="radio"/> yes <input type="radio"/> no <input type="radio"/> yes <input type="radio"/> no <input type="radio"/> Met after	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and acknowledged	<u>Ovidio Escalante</u> Examiner's Name Initials	DEX	1	12	2

ADDRESS
KENYON & KENYON
ONE BROADWAY
NEW YORK , NY 10004

TITLE
METHOD AND APPARATUS FOR USING A SERVICE MADE AVAILABLE IN A
TELECOMMUNICATIONS NETWORK

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="radio"/> All Fees <input type="radio"/> 1.16 Fees (Filing) <input type="radio"/> 1.17 Fees (Processing Ext. of Time) <input type="radio"/> 1.18 Fees (Issue) <input type="radio"/> Other _____ <input type="radio"/> Credit
\$**920		

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